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NO. 2402 P. 1

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Ronnie L. Jordan (Depositor's name)  
*Ronnie L. Jordan* (Signature)  
February 15, 2007 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/021,407	12/12/2001	Edward A. Rhead	END-795	3685

TITLE OF INVENTION: MRI COMPATIBLE SURGICAL BIOPSY DEVICE HAVING A TIP WHICH LEAVES AN ARTIFACT

APPL. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	03/15/2007
EXAMINER	ART UNIT	CLASS-SUBCLASS				
FOREMAN, JONATHAN M	3736	600-567000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.303).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ETHICON ENDO-SURGERY, INC.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

CINCINNATI, OHIO

Recorded: 03/12/2002

Reel: 012695

Frame: 0492

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Joseph F. Shirtz

Date

February 13, 2007

Typed or printed name

Registration No.

31,880

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OMB 0651-0033

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